



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E308660**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	14-00405
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

DATE OF COLLISION	02	-	19	-	2014	TIME (2400)	2013	COUNTY #	31	MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	IN OF <input checked="" type="checkbox"/>	CITY #	0664
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ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

91ST AVE NE	BLOCK NO. <input checked="" type="checkbox"/>	303
	MILE POST <input type="checkbox"/>	

DISTANCE		MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)	
		FEET			

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PHONE	
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LAST NAME	UNKNOWN	FIRST NAME		MIDDLE INITIAL	
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STREET NEW ADDRESS	
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CITY		ST		ZIP	
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #		STATE		SEX	U	D.O.B.			
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	9	RESTR	9	EJECT	9	HELMET USE	9	INJURY CLASS	0	NATURE OF INJURIES	
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LICENSE PLATE #		STATE		VIN#	
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR		MAKE	UNKN	MODEL	UNKNO	STYLE		VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE	
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	
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LAST NAME	UNKNOWN	FIRST NAME		MIDDLE INITIAL	
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STREET NEW ADDRESS	
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CITY		ST		ZIP	
------	--	----	--	-----	--

CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #		STATE		SEX	U	D.O.B.			
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	9	RESTR	9	EJECT	9	HELMET USE	9	INJURY CLASS	0	NATURE OF INJURIES	
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LICENSE PLATE #	B38840F	STATE	WA	VIN#	2GCEK19J381111448
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2008	MAKE	CHEV	MODEL	SILVERA	STYLE	PK	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	WILLIAM HARRIS 10003 CHAPEL HILL RD LAKE STEVENS WA 98258 D: 2065714024
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	STATE FARM 072 1427-D18-47C
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE	
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OFFICER'S NAME (PRINT)	D. PLANALP	BADGE OR ID #	102	AGENCY	WA0311900
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STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E308660**

CASE # **14-00405**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY				
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY				
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY				
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES

NARRATIVE

V-2 called 911 to report that he vehicle was hit while he was in a store. V-2 was parked unoccupied in a parking lot. V-2 had damage to the mid passenger side of the vehicle. V-2 is white and the damage had red and yellow paint transfer. The damage did not look like it was struck by a vehicle. Video surveillance showed that V-2 was not hit by another vehicle while it was parked. As of right now it is unknown when, where, how or by who V-2 was struck.

\*\*\*\* AUTO-POPULATED SECTION \*\*\*\*

THE FOLLOWING ARE DESCRIPTIONS ENTERED FOR ITEMS SELECTED AS "OTHER":

Motor Vehicle Unit 1

Action Code: UNKNOWN

\*\*\*\* END OF AUTO-POPULATED SECTION \*\*\*\*

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

D. PLANALP

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

02-20-14 02:54 AM

DATED

PLACE SIGNED

APPROVED BY

BOB SUMMERS 079

DATE

2/20/2014 4:38:27 AM

BADGE OR ID #

102

ORI #

WA0311900

TIME POLICE DISPATCHED

8:14 PM

TIME POLICE ARRIVED

8:22 PM

REPORT NO. E308660

CASE # 14-00405

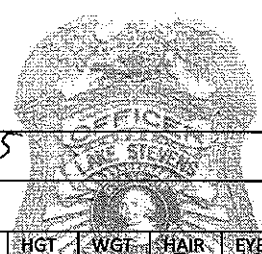
DATE AND TIME  
OF COLLISION 02/19/14 20:13



It's unknown when, where, how or by who the vehicle was hit

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT



CASE NUMBER 14-00905

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) William Harris	RACE W	ETH	SEX M	DOB 06-06-72	AGE 41	HGT 5'11"	WGT 225	HAIR BRN	EYES GRN
STREET ADDRESS 10003 CHAPEL Hill RD		CITY LIL STEVENS		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE 425-263-9816		CELL PHONE 206-571-4024		PLACE OF EMPLOYMENT STORELINE CONST.						
WORK PHONE 206-571-4024		EMAIL ADDRESS BILLY-N-EMILY@YAHOO.COM								

I, William Harris, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

AT AROUND 8:00 PM OR SLIGHTLY AFTER PARKED

AT ANBERSONS TO PICK UP GROCERIES. AFTER BEING IN STORE APPROXIMATELY TEN MINUTES I CAME OUT AND FOUND THE PASSENGER SIDE OF MY TRUCK DAMAGED. NO CARS WERE AROUND MY TRUCK WHEN I GOT THERE I IMMEDIATELY CALLED 911.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 2-19-14	LOCATION SIGNED ON SITE OFF DAMAGE
OFFICER/NUMBER: 	DATE SIGNED 2-19-14	LOCATION SIGNED LIL STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, crime prevention and education"

LSPD  
PAGE 1  
ORIGINAL

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <b>D. PLANALP #102</b>		Case Number <b>14-00405</b>	
Type of Crime: <del>Felony</del> / Misdemeanor (Circle)		Type of Case: <b>VEH COLLISION</b>		Date/Time: <b>2-18-14 12:15</b>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification			

Item # <b>1</b>	Item <b>CD WITH PICS</b>		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)		
	Serial #	Where Found	Weight of Narcotic			
Action # <b>3</b>						
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)		
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)		
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here


  

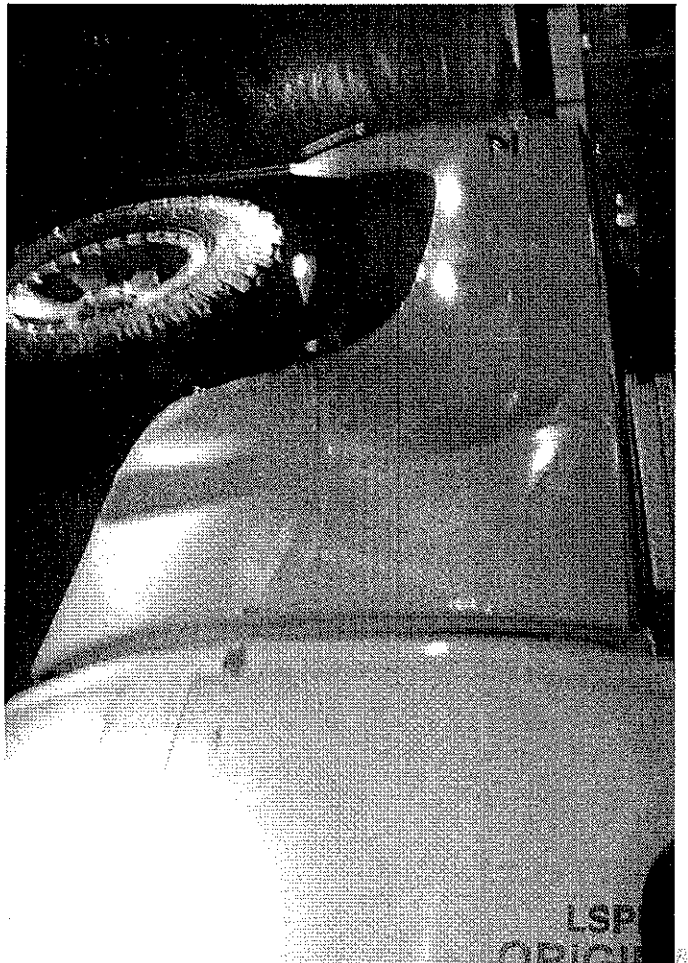
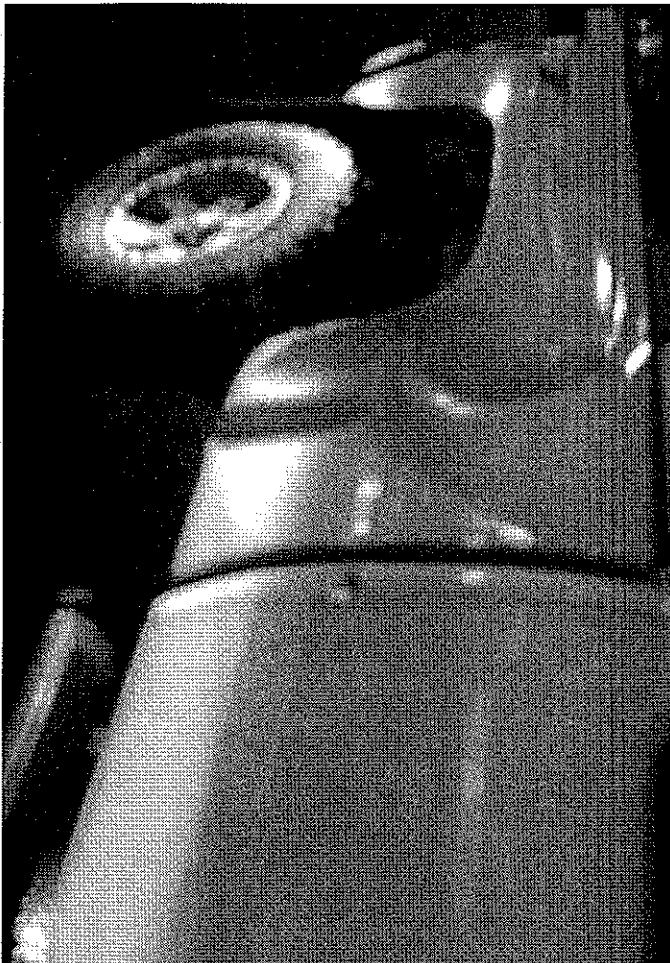
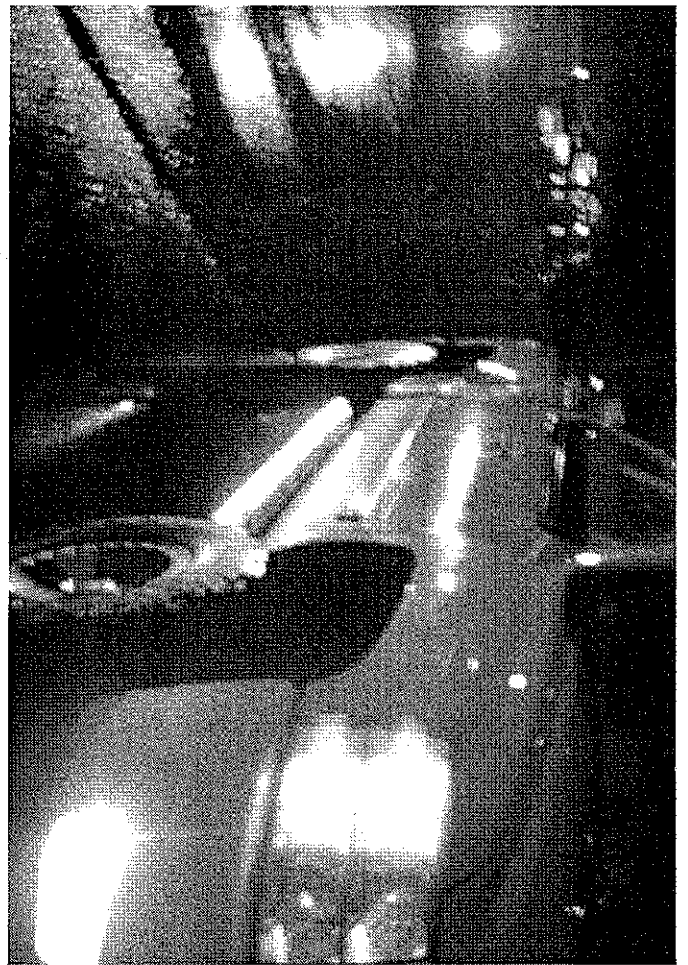
Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)		
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here

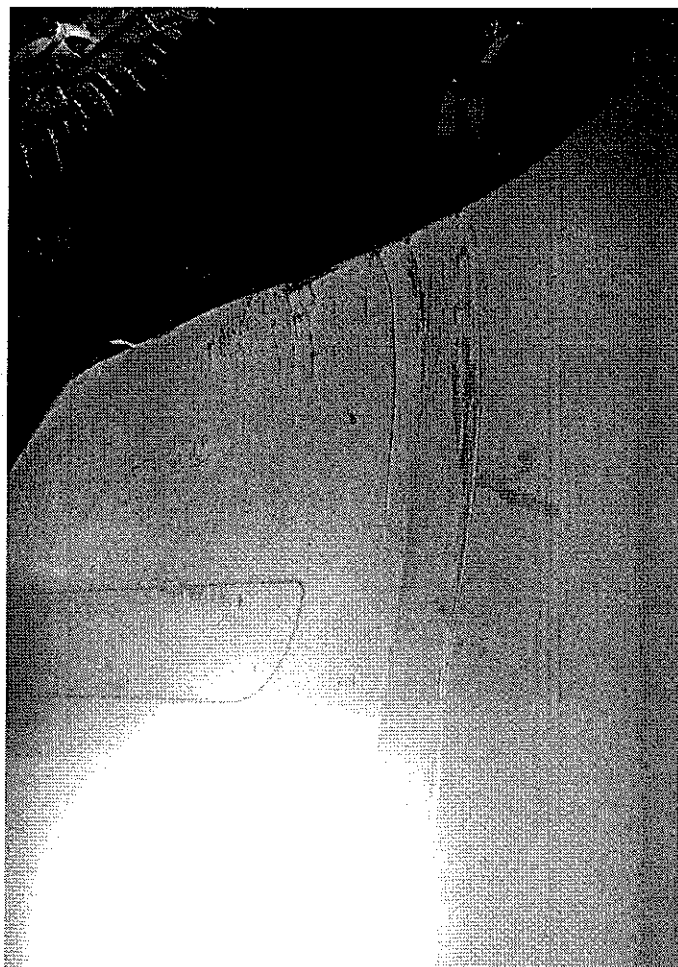
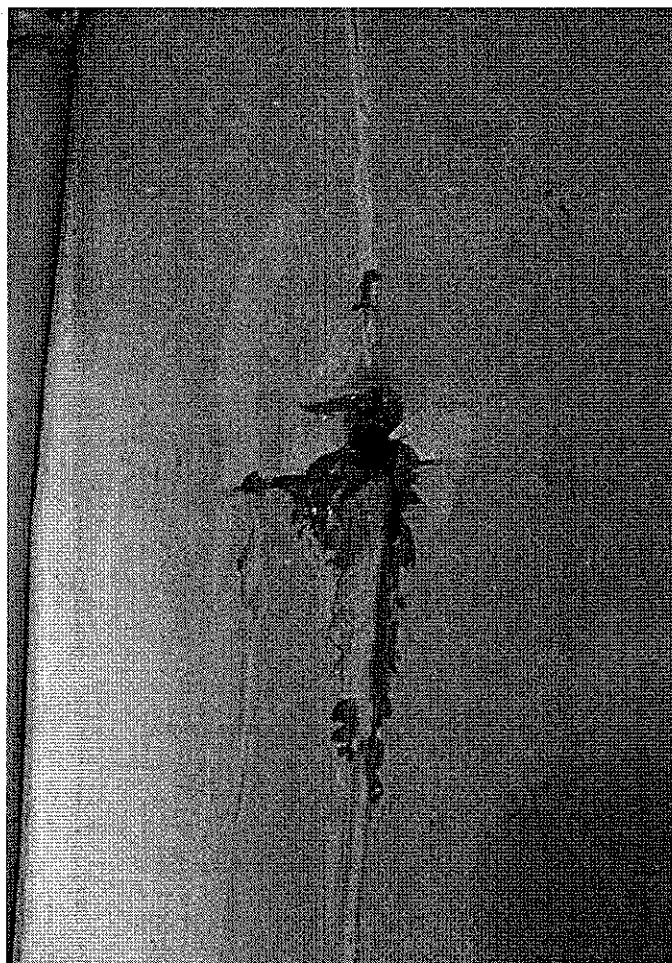
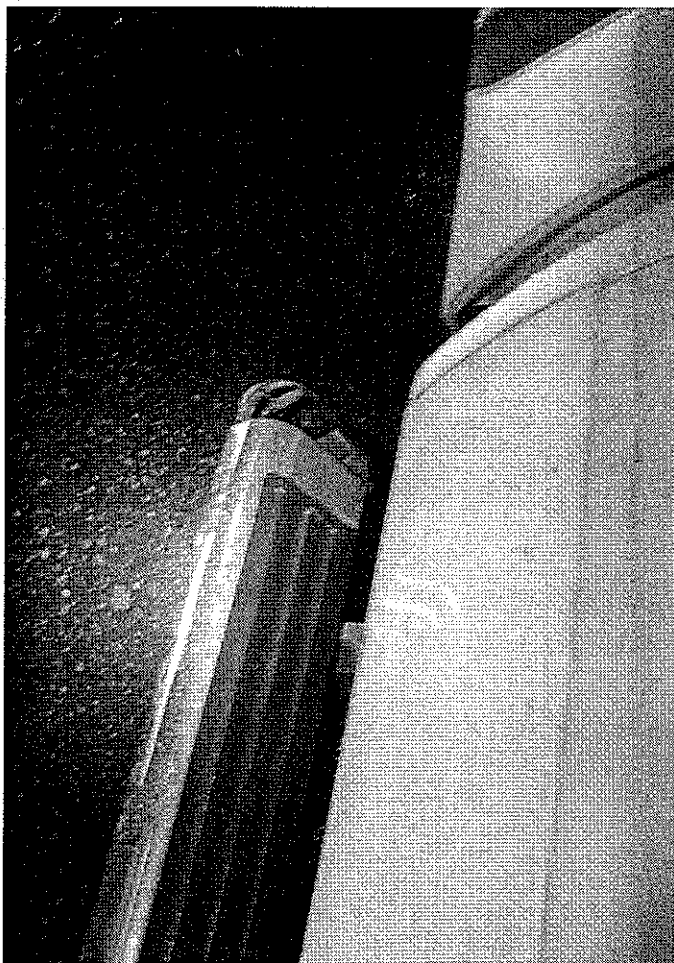
Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)		
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here

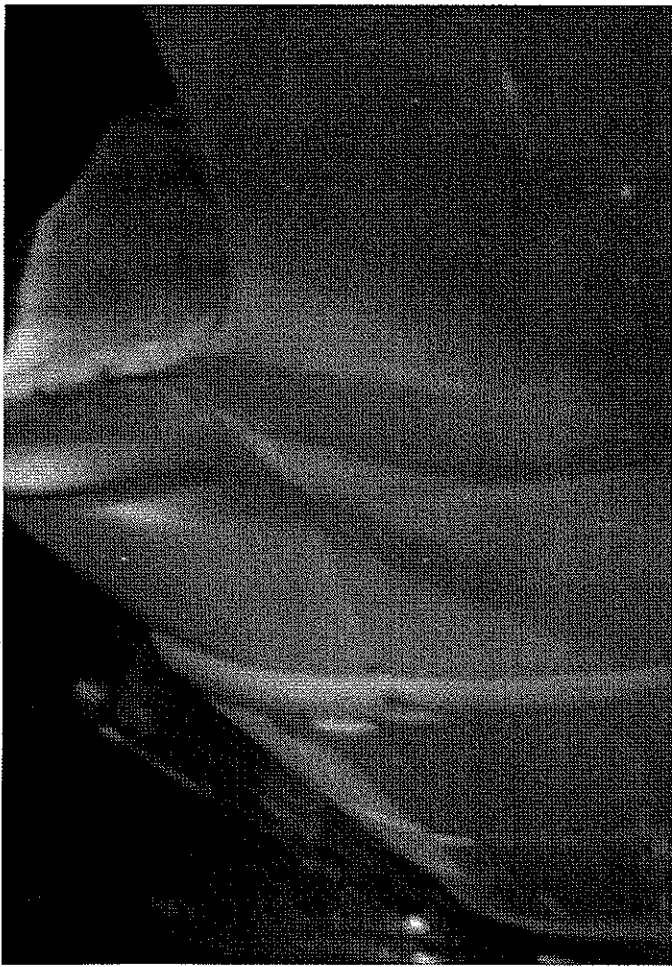
Evidence Control Use Only:					
Received by Evidence:		NCIC/WACIC <input checked="" type="checkbox"/> Date:	CAD/RMS Checked		ROUTED TO <b>LSPD</b>  Yellow: Case File
Name: _____ # _____		NCIC/WACIC + Date:	Owner Letter Sent:		
Date: _____ Time: _____		NCIC/WACIC - Date:	Owner Letter Sent:		







ORIGINAL



LSPD  
ORIGINAL



Incident History for: #SS14003281

Case Numbers: \$\$\$14000405

Entered 02/19/14 20:13:36 BY SPCT05 SP0326  
Dispatched 02/19/14 20:14:00 BY SPDP17 ROGER  
Enroute 02/19/14 20:14:00  
Onscene 02/19/14 20:22:05  
Closed 02/19/14 20:48:42

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 3 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 303 91 AV NE , LKS -- ALBERTSONS , LKS btwn MARKET PL & SR 204 (V)

Loc Info:

Name: HARRIS, WILLIAM

Addr:

Phone: 2065714024

/2013 (SP0326) ENTRY , CC, W/IN PST 10 MINS, H/R TO RPS VEH-NS -NEAR THE  
FRONT IN WHI LIFTED CHEVY PU  
/2013 CHANGE PRI: 2 --> 3  
/2014 (ROGER ) DISPER 19N1 #SS102 PLANALP, OFFICER (DANIEL)  
/2014 ASSTER 19N2 #SS126 HINGTGEN, OFFICER (MICHAEL)  
/2018 (SS102 ) REMINQ 19N1 MDTVEH, AMK2214,, WA, , , , , , , , , ,  
/2019 REMINQ 19N1 MDTVEH, AMB4760,, WA, , , , , , , , , ,  
/2019 REMINQ 19N1 MDTVEH, B06954V,, WA, , , , , , , , , ,  
/2020 (SS126 ) REMINQ 19N2 MDTVEH, B06954V,, WA, , , , , , , , , ,  
/2022 (ROGER ) ONSCNE 19N1  
/2022 (SS126 ) \*ONSCNE 19N2  
/2022 (SS102 ) REMINQ 19N1 MDTVEH, B38840F,, WA, , , , , , , , , ,  
/2023 (SS126 ) REMINQ 19N2 MDTVEH, B38840F,, WA, , , , , , , , , ,  
/2023 REMINQ 19N2 MDTWANT, , , , , , WA, HARRIWW285LF, , , , , , , , , ,  
/2027 (ROGER ) ASNCAS 19N1 \$\$\$14000405  
/2048 (SS102 ) REMINQ 19N1 MDTVEH, 577ZKE,, WA, , , , , , , , , ,  
/2048 (ROGER ) CLEAR 19N1 D/H  
/2048 CLEAR 19N2 D/H  
/2048 CLOSE 19N2

LSPD  
ORIGINAL